



## Hospital Owned Provider-Based Clinic Reporting

1	Fiscal Year Ended:	12/31/17	License #
2	Hospital Name	Skagit County Public Hospital District No. 2, c	
a	The number of provider-based clinics owned or operated by the hospital that charge or bill a separate facility fee		
b	The number of patient visits at each provider-based clinic owned for which a facility fee was charged or billed for the year		
c	The revenue received by the hospital for the year by means of facility fees at each provider-based clinic		
d	The range of allowable facility fees paid by public or private payers at each provider-based clinic		

Please submit to DOH either by mail, fax or email to the following address:

Washington State Department of Health  
 Community Health Systems/Hospital and Financial and Charity Care Section  
 MS: 47853  
 Olympia, WA 98504-7853  
 Fax: (360) 236-2870  
 email: hos@doh.wa.gov

Facility fee means any separate charge or billing by a off-campus provider-based clinic in addition to a p physicians' services that is intended to cover building, electronic medical records systems, billing, and ot operational expenses.

DOH

H-134
dba Island Hospital
1
2,289
256,391
\$0-\$130

professional fee for  
other administrative and